U.S. Department of Labor Office of Labor Management Standards Washington DC 20210

For Official Use Only

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FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No 1215-0188 Expires 11 30 2006

This report is mandatory under P.L. 88-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

AUG 2 200 READ THE INSTRUCTIONS CAREFU	LLY BEFORE PREPARING THIS REPORT
E JPOP	
1 File Number U /0/4/	2 Fiscal Year Covered From
	1 / 1 / 2004 Through 12 / 31 / 2004
3 Name and address of person filing	4 Name file number and address of labor organization
Name DENNIS ROBERTS - 4-	Name TEAMSTERS LOCAL_UNION 407
	Labor Organization File Number 011-109
PO Box Bidg Room No If any 204	P O Box Building and Room Number if any 204
Street 3701 BOSWORTH ROAD	Street 3701 BOSWORTH ROAD
City CLEVELAND	City CLEVELAND
State Ohio ZiP Code + 4 44111	State Ohio , ZIP Code + 4 44111
5 Position in labor organization UNION REPRESENTATIVE	
A Held an interest in engaged in transactions (including loans) with o monetary value from an employer whose employees your organiza 6 Name and address of Employer (including trade name if any)	r derived income or other economic benefit of tion represents or is actively seeking to represent 7 a Nature of Interest Transaction or Income
Name	
Trade Name if any	
P O Box Bidg Room No If any	7 b Amount
Street	1
City	
State ZIP Code + 4	
sig	gnature
15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned s knowledge and belief true correct, and complete (See the section on penalties in the instructions)	
Signed Denne Rolley	On 8-12-05 2/6-688 0837 Date Telephone Number
	- i originati ratitati

Name of Person Filing DENNIS ROBERTS	File Number U	
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested		
8 Name and address of Business (including trade name if any)	9 Business deals with	
Name FAULKNER MUSKOVITZ & PHILLIPS LLP		
Trade Name If any	a Labor Organization	
PO Box Bldg Room No if any NINTH FLOOR	b Trust c Employer	
Street 820 WEST SUPERIOR AVENUE	C Employer	
Oty CLEVELAND		
State Ohio ZIP Code + 4 44113		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name	COUNSELORS OF LAW TO TEAMSTERS LOCAL INION 407	
Trade Name if any		
PO Box Bldg Room No if any		
Street	11 h Approvimento dellos value ef queb deglina	
City	11 b Approximate dollar value of such dealing	
State ZIP Code + 4	12 a Nature of interest held or income received RECEIVED CHRISTMAS GIFT OF PERISHABLE GOODS	
	12 b Amount \$55	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value		
13 a Name and address of Employer or Labor Relations Consultant (Including trade name if any)	14 a Nature of payment	
Name		
Trade Name if any	[]	
PO Box Bldg Room No if any		
Street		
City		
State ZIP Code + 4		
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment	